PAGE 1 / 32

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		or An Authorize)		Office Use Only	
NAME OF COMMITTEE (in		OR PRINT ▼		le: If typing e lines.	g, type	12FE4M5		
Frederica S. W	ilson for Con	gress						
	1083	1 NW 2nd Ave.						
ADDRESS (number an	d street)							
Check if difthan previous reported. (A	ısly Miaı	ni Gardens				FL [33169	
2. FEC IDENTIFIC	CATION NUMBER	R▼ C	CITY A			STATE A	ZIP CODE	
C C0046005		3. IS		NEW (N)	OR	AMEND (A)	STATE ▼ D	ISTRICT
(a) Quarterly Re	PORT (Choose Or eports: Quarterly Report (Quarterly Report ((b) 12-E		ction Repo mary (12P) nvention (1	[General (1		(12R)
G day 10	15 Quarterly Report	. (00)	ction on	M M /	D D /	Y " Y " Y " Y	in the State of	
January	31 Year-End Repo	rt (YE) (c) 30-E	Day POST -El	ection Rep	ort for the:			
			Ge	neral (30G)		Runoff (30	IR) Specia	ıl (30S)
Termina	tion Report (TER)	Ele	ction on	M M /	D D /	Y Y Y Y	in the State of	
5. Covering Period	M M M / 04	01 / Y Y 2015		through	M M M 06	/ 30 /	2015	
I certify that I have e		ort and to the best	of my knowle	edge and k	pelief it is ti	rue, correct and	l complete.	
Signature of Treasure			[Ele	ctronically F	Filed]	Date 07		Y Y
	false, erroneous, or	incomplete informat	ion may subj	ect the pers	son signing	this Report to the	ne penalties of 2 U.S.C.	§437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)	³ I

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

Frederica S. Wilson for Congress

04 06 30 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 57350.00 99250.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 57350.00 99250.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 18900.57 51803.87 (from Line 17) (b) Total Offsets to Operating 0.00 484.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 18900.57 51319.87 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 257014.03 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 15906.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 32

Write or Type Committee Name

Frederica S. Wilson for Congress

Report Covering the Period: From: 04 01 2015 To: 06 30 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11. CONTRIBUTIONS (other than	loans) FROM:			
(a) Individuals/Persons Other Political Committees (i) Itemized (use Schedu	22000.00	27000.00		
(ii) Unitemized(iii) TOTAL of contribution		1250.00		
from individuals	00050 00	28250.00		
(b) Political Party Committee (c) Other Political Committee	, ,	0.00		
(such as PACs)	24000 00	71000.00		
(d) The Candidate(e) TOTAL CONTRIBUTIONS		0.00		
(other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) 57350.00	99250.00		
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3. LOANS:				
(a) Made or Guaranteed by Candidate	0.00	0.00		
(b) All Other Loans	0.00	0.00		
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00		
4. OFFSETS TO OPERATING EXPENDITURES				
(Refunds, Rebates, etc.)	0.00	484.00		
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
 TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 	57350.00	99734.00		

FEC Form 3 (Revised 02/2003)

DETAILED SUMMARY PAGE

of Disbursements PAGE 4 / 32

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. C	DPERATING EXPENDITURES	18900.57	51803.87
	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
	OAN REPAYMENTS: a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
`	b) Of All Other Loans c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
	REFUNDS OF CONTRIBUTIONS TO:		
(;	a) Individuals/Persons Other Than Political Committees	0.00	0.00
(1	b) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
(0	d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21. (OTHER DISBURSEMENTS	16529.09	43629.09
	TOTAL DISBURSEMENTS add Lines 17, 18, 19(c), 20(d), and 21)	35429.66	95432.96
	III. CASH SU	MMARY	
23. (CASH ON HAND AT BEGINNING OF REPOR	TING PERIOD	235093.69
24 T	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	57350.00
25. S	SUBTOTAL (add Line 23 and Line 24)		292443.69
26. T	OTAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	35429.66
	CASH ON HAND AT CLOSE OF REPORTING subtract Line 26 from Line 25)		257014.03

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 32 Use separate schedule(s) (check only one) 11a 11b 11d 11c 12 13a 13b 14

for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Ibrahim Al-Rashid Date of Receipt Mailing Address 209 S Biscayne Blvd 2015 18 FI 6 City State Zip Code Transaction ID: C9342104 FL 33131-2301 Miami FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 5200.00 Name of Employer Occupation none none Receipt For: 2016 Election Cycle-to-Date Primary General 5200.00 Other (specify) Full Name (Last, First, Middle Initial) Micky Arison Date of Receipt Mailing Address 9999 Collins Ave 06 29 2015 Apt 15-GJ Citv State Zip Code Transaction ID: C9365303 Miami Beach FL 33154 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Retired Not employed Receipt For: 2016 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Spencer Dickerson Date of Receipt Mailing Address 4001 Carson Place 2015 28 City State Zip Code Transaction ID: C9344495 VA Alexandria 22304 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation American Association of Airport Execut Senior Executive Vice President, Globa Receipt For: 2016 Election Cycle-to-Date Y Primary General Other (specify) 500.00 6700.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: **PAGE** 6 OF 32 Use separate schedule(s) (check only one) 11a 11b 11c 11d 12

for each category of the Detailed Summary Page 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Shawna Francis Francis Watley Date of Receipt Mailing Address 66 Hawthorne Ct NE 2015 28 City State Zip Code Transaction ID: C9344496 DC 20017-1043 Washington FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Holland & Knight Sr. Policy Advisor Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Adam M. Goldstein Date of Receipt Mailing Address 4321 Santa Maria Street 06 29 2015 Citv State Zip Code Transaction ID: C9365302 Coral Gables FL 33146 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation President & CEO Royal Caribbean Cruises LTD Receipt For: 2016 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Barry Hill Date of Receipt Mailing Address 5315 SW 119th Avenue 2015 05 City State Zip Code Transaction ID: C9344898 FL Cooper City 33330 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation AMG Healthcare Inc. President/CEO Receipt For: 2016 Election Cycle-to-Date | Y Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF 32 Use separate schedule(s) (check only one) 11a 11b 11c 12

for each category of the Detailed Summary Page 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Mike McKay Date of Receipt Mailing Address 1000 Connecticut Ave NW 2015 18 9th FI City State Zip Code Transaction ID: C9348341 DC 20036 Washington FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation **Empire Consulting Group** Principal Receipt For: 2016 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Leslie B. Murphy Date of Receipt Mailing Address 6915 Valencia Dr 05 19 2015 Citv State Zip Code Transaction ID: C9348001 Miami Beach FL 33109 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation N/A Homemaker Receipt For: 2016 Election Cycle-to-Date | Primary General 5400.00 Other (specify) Full Name (Last, First, Middle Initial) Leslie B. Murphy Date of Receipt Mailing Address 6915 Valencia Dr 2015 19 City State Zip Code Transaction ID: C9348002 FL Miami Beach 33109 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation N/A Homemaker Receipt For: 2016 Election Cycle-to-Date X General Primary 5400.00 Other (specify) 5650.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF 32 Use separate schedule(s) (check only one) 11a 11b 11c 11d 12 13a 13b 14

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Thomas P. Murphy Jr. Date of Receipt Mailing Address 5959 Blue Lagoon Dr 05 2015 19 STE 200 City State Zip Code Transaction ID: C9347999 FL 33126-2052 Miami FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2700.00 Name of Employer Occupation Coastal Construction Group General Contractor/CEO Receipt For: 2016 Election Cycle-to-Date Primary General 5400.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas P. Murphy Jr. Date of Receipt Mailing Address 5959 Blue Lagoon Dr 05 19 2015 STE 200 City State Zip Code Transaction ID: C9348000 Miami FL 33126-2052 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2700.00 Name of Employer Occupation General Contractor/CEO Coastal Construction Group Receipt For: 2016 Election Cycle-to-Date Primary ✓ General 5400.00 Other (specify) Full Name (Last, First, Middle Initial) Annie Neasman Date of Receipt Mailing Address 6799 Brookline Dr 2015 14 City State Zip Code Transaction ID: C9346924 FL Hialeah 33015-2441 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Jessie Trice Community Health Center, President and CEO Receipt For: 2016 Election Cycle-to-Date Primary General Other (specify) 500.00 5900.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Mahendra Patel Date of Receipt Mailing Address 3021 John Vaughan Rd. 05 2015 21 City State Zip Code Transaction ID: C9348340 VA 23185 Williamsburg FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Hope Medical Institute CEO Receipt For: 2016 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Marilyn Thompson Date of Receipt Mailing Address 901 New York Ave NW 06 18 2015 City State Zip Code Transaction ID: C9361752 Washington DC 20001-4432 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Executive Vice President, General Mana MWW Group Receipt For: 2016 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Michael Williams Date of Receipt Mailing Address The Williams Group 2015 16 1437 East Capitol Street, SE City Zip Code State Transaction ID: C9361745 DC Washington 20003 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation The Williams Group Lobbyist Receipt For: 2016 Election Cycle-to-Date Primary General Other (specify) 500.00 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF 32 (check only one) 11a 11b 11d 11c 12 13a 13b

Use separate schedule(s) for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Leslie Woolley Date of Receipt Mailing Address 609 Oakley Pl. 06 2015 30 City State Zip Code Transaction ID: C9364842 VA 22302 Alexandria FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Retired Retired Receipt For: 2016 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 23000.00

	FOR LINE NUMBER:	PAGE 11 OF 32
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	11a 11b X	11c 11d
Detailed Suffilliary Fage	12 13a	13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) AMERICAN AIRLINES POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address 1101 17 STREET N.W., SUITE 600 2015 22 City State Zip Code Transaction ID: C9348343 DC 20036 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00107300 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) American Association for Justice PAC Date of Receipt Mailing Address 777 6 Street, NW 28 2015 Suite 200 City State Zip Code Transaction ID: C9344497 Washington DC 20001 FEC ID number of contributing Amount of Each Receipt this Period С C00024521 federal political committee. 2000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) AMERICAN BENEFITS COUNCIL POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address 1501 M STREET NW 2015 25 SUITE 600 City State Zip Code Transaction ID: C9364764 WASHINGTON DC 20005 FEC ID number of contributing С C00153171 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A	(FEC Form	3)
ITEMIZED REC	CEIPTS	

FOR LINE NUMBER: **PAGE** 12 OF 32 Use separate schedule(s) (check only one) for each category of the X 11c 11a 11b 11d Detailed Summary Page 12 13a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) American Council of Life Insurers Date of Receipt Mailing Address 101 CONSTITUTION AVE., NW 2015 23 SUITE 700 City State Zip Code Transaction ID: C9362470 DC 20001 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00147066 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) American Dental Political Action Committee Date of Receipt Mailing Address 1111 14 Street, NW 19 2015 Suite 100 City State Zip Code Transaction ID: C9347998 Washington DC 20005 FEC ID number of contributing C00000729 Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) AMERIPRISE FINANCIAL INC. POLITICAL ACTION COMMITTEE (AMERIPRISEPAC) Date of Receipt Mailing Address 101 CONSTITUTION AVENUE NW 2015 29 SUITE 912 WEST City Zip Code State Transaction ID: C9364771 WASHINGTON DC 20001 FEC ID number of contributing С C00414474 Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General Other (specify) 2000.00 4000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 13 OF	32
Use separate schedule(s)	(check only one)	
for each category of the	11a 11b X 11c 11d	
Detailed Summary Page	12 13a 13b 14	15

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NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) AT&T Federal PAC Date of Receipt Mailing Address 208 S. Akard St. 06 2015 16 Ste. 3521 City State Zip Code Transaction ID: C9361746 TX 75202 Dallas FEC ID number of contributing Amount of Each Receipt this Period C00109017 federal political committee. 3000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION Date of Receipt Mailing Address 8400 WESTPARK DRIVE 05 26 2015 Citv State Zip Code Transaction ID: C9348342 **MCLEAN** VA 22102 FEC ID number of contributing C C00040998 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) DirecTV Date of Receipt Mailing Address 901 F STREET, NW 2015 16 SUITE 600 City State Zip Code Transaction ID: C9361749 WASHINGTON DC 20004 FEC ID number of contributing С C00331991 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) 5000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE 14 OF 32					
Use separate schedule(s)	(check only one)						
for each category of the	11a 11b X	11c 11d					
Detailed Summary Page	12 13a	13b 14 15					
y not be sold or used by any person for the purpose of soliciting contributions							

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Fidelity Investments Date of Receipt Mailing Address 245 SUMMER STREET 06 2015 29 City State Zip Code Transaction ID: C9364775 MA 02210 **BOSTON** FEC ID number of contributing Amount of Each Receipt this Period C00380550 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Financial Services Roundtable Date of Receipt Mailing Address 600 13TH STREET, N.W. 06 25 2015 SUITE 400 Citv State Zip Code Transaction ID: C9364776 WASHINGTON DC 20005 FEC ID number of contributing C C00193177 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Intellectual Ventures Date of Receipt Mailing Address 1100 H STREET, NW 2015 04 SUITE 900 City State Zip Code Transaction ID: C9344900 WASHINGTON DC 20005 FEC ID number of contributing С C00557165 Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1500.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A	(FEC Form	3)
ITEMIZED REC	CEIPTS	

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SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	I I	FOR LINE NUMBER: PAGE 15 OF 32 (check only one) 11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress		
		Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID : C9361751 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) LOCKHEED MARTIN CORPORATION EMPLOYEES Mailing Address 2424 CRYSTAL DRIVE	S' POLITICAL ACTION COMMITTEE	Date of Receipt
Mailing Address 2121 CRYSTAL DRIVE SUITE 100 City Sta	•	06 12 2015 Transaction ID : C9359970

Other (specify) Full Name (Last, Firs B. Mailing Address 212 SU City ARLINGTON FEC ID number of contributing C C00303024 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) Massachusetts Mutual Life Insurance Co. Date of Receipt Mailing Address 1295 STATE STREET 06 12 2015 City State Zip Code Transaction ID: C9359969 MA **SPRINGFIELD** 01111 FEC ID number of contributing C C00118943 Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 4000.00 Other (specify) 4500.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: **PAGE** 16 OF 32 (check only one) X 11c 11a 11b 11d 12 13a

Use separate schedule(s) for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) National Active & Retired Federal Employees Date of Receipt Mailing Address 606 NORTH WASHINGTON STREET 06 29 2015 City State Zip Code Transaction ID: C9364769 VA 22314 **ALEXANDRIA** FEC ID number of contributing Amount of Each Receipt this Period C00091561 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) National Association of Broadcasters Date of Receipt Mailing Address 1771 N STREET NW 06 22 2015 Citv State Zip Code Transaction ID: C9362469 WASHINGTON DC 20036 FEC ID number of contributing C00009985 Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) National Beer Wholesalers Association Date of Receipt Mailing Address 1101 KING STREET 2015 24 SUITE 600 City State Zip Code Transaction ID: C9364777 VA **ALEXANDRIA** 22314 FEC ID number of contributing С C00144766 Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1500.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional).....

Lakeland

FEC ID number of contributing

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE	17	OF	32	
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		1.2		100		100			10

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMI Date of Receipt Mailing Address 1750 H Street, NW 06 2015 29 City State Zip Code Transaction ID: C9364780 DC 20006 Washington FEC ID number of contributing Amount of Each Receipt this Period C00107128 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Prudential Financial Company of America Date of Receipt Mailing Address 751 BROAD STREET 06 15 2015 14TH FLOOR City State Zip Code Transaction ID: C9361742 **NEWARK** NJ 07102 FEC ID number of contributing C C00127779 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Publix Super Market, Inc. Date of Receipt Mailing Address PO Box 407 2015 16 City State Zip Code Transaction ID: C9361748 FL

federal political committee.	C C00400705	Amount of Each Receipt this Period			
Name of Employer	Occupation	1000.00			
Receipt For: 2016 Primary General Other (specify)	Election Cycle-to-Date				
SUBTOTAL of Receipts This Page (optional)		3000.00			
OTAL This Period (last page this line numb	ner only)				

33802

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 18 OF 32 (check only one) X 11c 11a 11b 11d 12 13a 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) SEABOARD CORPORATION POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address 9000 WEST 67TH STREET 05 2015 80 City State Zip Code Transaction ID: C9345167 KS 66201 SHAWNEE MISSION FEC ID number of contributing Amount of Each Receipt this Period C00246736 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) SIFMA Date of Receipt Mailing Address 1101 NEW YORK AVENUE, NW 06 30 2015 8TH FLOOR Citv State Zip Code Transaction ID: C9364841 WASHINGTON DC 20005 FEC ID number of contributing Amount of Each Receipt this Period С C00431312 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial)
TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF Date of Receipt Mailing Address 601 THIRTEENTH STREET, NW 2015 04 SUITE 500 NORTH City State Zip Code Transaction ID: C9344901 WASHINGTON DC 20005 FEC ID number of contributing С C00431361 Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date X General Primary 4000.00 Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 19 OF 32 (check only one) X 11c 11a 11b 11d 12 13a

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial)
TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF Date of Receipt Mailing Address 601 THIRTEENTH STREET, NW 06 2015 11 SUITE 500 NORTH City State Zip Code Transaction ID: C9351800 DC 20005 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00431361 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 4000.00 Other (specify) Full Name (Last, First, Middle Initial) U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address P.O. BOX 22945 05 05 2015 City State Zip Code Transaction ID: C9344899 HIALEAH FL 33002 FEC ID number of contributing Amount of Each Receipt this Period С C00387720 federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) UNIVISION COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE Date of Receipt Mailing Address 3699 WILSHIRE BLVD., #1290 2015 13 City State Zip Code Transaction ID: C9341903 CA LOS ANGELES 90010 FEC ID number of contributing С C00435735 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Receipt For: 2016 Election Cycle-to-Date Primary General Other (specify) 1000.00 3000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Image# 201507159000136348		
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 32 (check only one) X 17
Any information copied from such Reports and Statements ${\bf m}$ or for commercial purposes, other than using the name and ${\bf m}$		
NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress		
Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting Mailing Address 499 S. Capitol St. SW		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Suite 422 City State Washington DC Purpose of Disbursement Campaign Event Food and Beverage Expense Candidate Name	Zip Code 20003 Category	Amount of Each Disbursement this Period 228.86 Transaction ID : D610840
Office Sought: House Senate President State: Disbursement For Primary Other (s	General	
Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting		Date of Disbursement

Mailing Address	499 S. Capitol St. SW Suite 422				04 / D D / Y Y Y Y Y Y 22 2015
City		State	Zip Code		Amount of Each Disbursement this Period
Washington		DC	20003		Authority of Each Biobardonicht und Feriod
Purpose of Disbu Fundraising and Candidate Name	ursement Compliance Fee		Category/ Type	4500.00 Transaction ID : D610841	
				Type	

Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President State: District:

Full Name (Last, First, Middle Initial)

President

Date of Disbursement c. Angerholzer Broz Consulting

Other (specify)

Mailing Address 499 S. Capitol St. SW Suite 422 City Zip Code State Washington DC 20003 Purpose of Disbursement Campaign Postal and Mailing Expenses Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General

M M	/	D D	/	Y Y Y Y
04		22		_ 2015

Amount of Each Disbursement this Period 449.50

Transaction ID: D610842

State:	District:											
										51	78.30	6
SUBTOTAL of	of Disbursements This Page	(optional)		_				j			70.0	,
						7						
TOTAL This	Period (last page this line nu	umber only)		_	- 1	-	-		-		_	

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 21 OF 32 (check only one) In the second of the
	ny information copied from such Reports and Star for commercial purposes, other than using the r				
	NAME OF COMMITTEE (In Full) * Frederica S. Wilson for Congress	1			
Α.	Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting				Date of Disbursement
	Mailing Address 499 S. Capitol St. SW Suite 422				04 22 2015
	City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Office Supplies				14.99 Transaction ID : D610843
	Candidate Name			Category/ Type	
	Office Sought: House Senate President Disburs	ement For Primary Other (s	General		
_	State: District:				
B. Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting Mailing Address 499 S. Capitol St. SW					Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Z Y Z 2015
	Suite 422 City	State	Zip Code		
	Washington	DC	20003		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Phone Expenses				25.00 Transaction ID : D610844
	Candidate Name			Category/ Type	
		Primary Other (s	General		
	State: District:				
C.	Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting				Date of Disbursement
	Mailing Address 499 S. Capitol St. SW Suite 422				04 22 7 2015
	City Sta Washington DC		p Code 0003		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Transportation Expense				13.00 Transaction ID : D610845
	Candidate Name			Category/ Type	Transaction is . Borocac
	Office Sought: House Disburs Senate President	Primary Other (s	General		
_	State: District:				
					52.99

SUBTOTAL of Disbursements This Page (optional).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

City

Mailing Address 499 S. Capitol St. SW

Suite 422

State

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Image# 201507159000136350							
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 32 (check only one) X 17					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress							
Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting Mailing Address 499 S. Capitol St. SW Suite 422		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City State Washington DC Purpose of Disbursement Fundraising and Compliance Fees Candidate Name Office Sought: House Senate President President State: District:	General	Amount of Each Disbursement this Period 4500.00 Transaction ID : D610848					
Full Name (Last, First, Middle Initial) Angerholzer Broz Consulting		Date of Disbursement					

05

2015

Amount of Each Disbursement this Period

DC 20003 Washington Purpose of Disbursement Campaign Postage and Mailing Fees 20.20 Transaction ID: D610849 Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Angerholzer Broz Consulting Mailing Address 499 S. Capitol St. SW 05 2015 Suite 422 City Zip Code State Amount of Each Disbursement this Period DC 20003 Washington Purpose of Disbursement 25.00 Campaign Phone Expenses Transaction ID: D610850 Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Senate General Primary President Other (specify) State: District:

Zip Code

S

age# 20.007.100000.0000.									
SCHEDULE B (FEC Form 3)			I	FOR LINE NUMBER: PAGE 23 OF 32 (check only one)					
ITEMIZED DISBURSEMENTS		Use separate sch	of the	X 17 18 19a 19b					
		Detailed Summar	y Page	20a 20b 20c 21					
				erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)		, ,							
Frederica S. Wilson for 0	Congress								
Full Name (Last, First, Middle Initial	,			Data (Disk and a second					
A. Angerholzer Broz Consu	liting			Date of Disbursement					
Mailing Address 499 S. Capitol St. S Suite 422	SW			06 17 2015					
City	State	Zip Code		Amount of Each Disbursement this Period					
Washington	DC	20003		4500.00					
Purpose of Disbursement Fundraising and Compliance Fee									
Candidate Name			Category/	Transaction ID : D610857					
			Type						
Office Sought: House	Disbursement For								
Senate President	Primary Other (s								
State: District:		,,,							
Full Name (Last, First, Middle Initial)								
B. Angerholzer Broz Consu	ulting			Date of Disbursement					
Mailing Address 499 S. Capitol St. S Suite 422				06 17 2015					
City	State DC	Zip Code 20003		Amount of Each Disbursement this Period					
Washington Purpose of Disbursement		20003		25.00					
Campaign Phone Expense				Transaction ID : D610858					
Candidate Name			Category/ Type						
Office Sought: House	Disbursement For								
Senate President	Y Primary Other (s								
State: District:		1 //							
Full Name (Last, First, Middle Initial)								
c. Angerholzer Broz Consu				Date of Disbursement					
Mailing Address 499 S. Capitol St. S Suite 422				06 17 2015					
City Washington		p Code 20003		Amount of Each Disbursement this Period					
Purpose of Disbursement Campaign Transportation Expense				19.74					
Candidate Name			Category/ Type	Transaction ID : D610859					
Office Sought: House Senate	Disbursement For Primary	General							
State: President District:	Other (s	ьреспу)							
2.00.100									

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 OF 32 (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress	,	
Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting		Date of Disbursement
Mailing Address 499 S. Capitol St. SW Suite 422		05 27 2015
City State Washington DC	Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Travel Expenses		582.09 Transaction ID : D610864
Candidate Name	Category/ Type	
State: District: Full Name (Last, First, Middle Initial)		
Express EMPS Mailing Address PO Box 6600		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Hagerstown MD	Zip Code 21740	Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Bank Fees Candidate Name	Category/ Type	175.53 Transaction ID : D610865
Office Sought: House Disbursement Formation Senate President State: District:	pr: 2016	
Full Name (Last, First, Middle Initial)		
Express EMPS		Date of Disbursement
Mailing Address PO Box 6600		05 31 2015
•	Zip Code 21740	Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Bank Fees		39.95
Candidate Name	Category/ Type	Transaction ID : D610866
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE	NUMBER	R:		PAGE	25	OF	32
Use separate schedule(s) for each category of the Detailed Summary Page	(check on	ly one)						
	X	17		18		19a		19b
		20a		20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions								

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Express EMPS 2015 Mailing Address PO Box 6600 03 City State Zip Code Amount of Each Disbursement this Period MD Hagerstown 21740 Purpose of Disbursement 110.36 Charitable Donation Transaction ID: D610872 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) National Democratic Club Date of Disbursement Mailing Address 30 Ivy Street, SE 05 05 2015 City State Zip Code Amount of Each Disbursement this Period DC 20003 Washington 67.50 Purpose of Disbursement Campaign Event Expense- Space Fee Transaction ID: D610847 Candidate Name Category/ Type Disbursement For: Office Sought: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. National Democratic Club Date of Disbursement Mailing Address 30 Ivy Street, SE 06 04 2015 City Zip Code State Amount of Each Disbursement this Period 20003 Washington DC Purpose of Disbursement 983.85 Campaign Event Food and Beverage Expense Transaction ID : D610855 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate General Primary President Other (specify) State: District: 1161.71 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 26 32 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress Full Name (Last, First, Middle Initial) Date of Disbursement National Democratic Club 2015 Mailing Address 30 Ivy Street, SE 06 24 City State Zip Code Amount of Each Disbursement this Period DC Washington 20003 Purpose of Disbursement 70.00 Campaign Event Expense- Space Fee Transaction ID: D610862 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) NGP Software, Inc. Date of Disbursement Mailing Address 1225 I St NW 05 06 2015 Ste 1225 City State Zip Code Amount of Each Disbursement this Period DC 20005-5918 Washington 2100.00 Purpose of Disbursement Campaign Database Software Transaction ID: D610851 Candidate Name Category/ Type Disbursement For: Office Sought: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. NGP Software, Inc. Mailing Address 1225 I St NW 06 2015 Ste 1225 City State Zip Code Amount of Each Disbursement this Period 20005-5918 Washington DC 50.00 Purpose of Disbursement Campaign Database Software Transaction ID : D610854 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House General Senate Primary President Other (specify) State: District: 2220.00 SUBTOTAL of Disbursements This Page (optional).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

			NUMBE	R:		PA	GE	27	OI	F	32
Use separate schedule(s)	(check	onl	y one)								
for each category of the Detailed Summary Page		X	17		18			19a			19b
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y not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.											

Any information copied from such Reports and Statements may not be sold or user for commercial purposes, other than using the name and address of any politic		
NAME OF COMMITTEE (In Full)		
Frederica S. Wilson for Congress		
Full Name (Last, First, Middle Initial) A. Runyan Holdings, LLC		Date of Disbursement
Mailing Address 8 E Street, SE		04 22 / 2015
City State Zip Code Washington DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Campaign Event Expense- Room Rental Fee		250.00 Transaction ID : D610846
Candidate Name	Category/ Type	
Office Sought: House Senate President State: Disbursement For: 2016 Primary Other (specify)		
State: District: Full Name (Last, First, Middle Initial)		
3.	Date of Disbursement	
Mailing Address		M " M / D " D / Y " Y " Y " Y
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category/ Type	
Office Sought: House Senate President State: Disbursement For: Primary Other (specify) Other (specify)		
Full Name (Last, First, Middle Initial)		
C.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category/ Type	
Office Sought: House Senate President State: Disbursement For: Primary Other (specify) Other (specify)		
		250.00
SUBTOTAL of Disbursements This Page (optional)	<u></u>	
TOTAL This Period (last page this line number only)		18750.57

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 28 OF 32 (check only one)
	Detailed Summary Page	20a 20b 20c X 21
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Frederica S. Wilson for Congress		
Full Name (Last, First, Middle Initial) A. DEMOCRATIC CONGRESSIONAL CAM	IPAIGN COMMITTEE	
Mailing Address 430 SOUTH CAPITOL STREET, SE 2ND FLOOR		06 24 2015
City State	Zip Code	Amount of Each Disbursement this Period
Washington DC Purpose of Disbursement	20003	15909.09
Contribution		Transaction ID : D610860
Candidate Name	Category. Type	
Office Sought: House Senate President Disbursement For: Primary Other (sp	General	
State: District:		
Full Name (Last, First, Middle Initial)		
3.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category. Type	/
Office Sought: House Disbursement For: Senate Primary Other (sponsors)	General	
State: District:		
Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		M M / D D / Y Y Y
City State Zip	Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name	Category. Type	
Office Sought: House Senate Primary President Other (sp	General	
State: District:		
SUBTOTAL of Disbursements This Page (optional)		15909.09

TOTAL This Period (last page this line number only).....

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

29

×	13a
	13h

32

(check only one) Detailed Summary Page Transaction ID: L390 NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Ms. Frederica S Wilson General Mailing Address Other (specify) ullet1018 NW 204 St City State ZIP Code FL 33169 Miami Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 250.00 0.00 250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 03^M ž009 None No due date % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 250.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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X	13a
	13b

32

Detailed Summary Page Transaction ID: L575 NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Ms. Frederica S Wilson General Mailing Address Other (specify) ullet1018 NW 204 St City State ZIP Code FL 33169 Miami Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 4500.00 0.00 4500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M06^M ž009 None No Due Date % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

31 OF

X	13a
	13h

32

(check only one) Detailed Summary Page Transaction ID: L579 NAME OF COMMITTEE (In Full) Frederica S. Wilson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 [PERSONAL FUNDS] Primary Ms. Frederica S Wilson General Mailing Address Other (specify) \blacktriangledown 1018 NW 204 St City State ZIP Code FL 33169 Miami Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50000.00 39500.00 10500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 08^M 20 Ž010 None Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 10500.00 TOTALS This Period (last page in this line only) 15250.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 32 OF
FOR LINE NUMBER:
(check only one)

:		
		9
	X	10

32

NAME OF COMMITTEE (In Full)

Frederica S Wilson for Congress

Г	rederica S. Wilson for	Congress	
	A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
	Political Development Group		Event Food and Beverage Expense
ŀ	Mailing Address 400 Cauth Canital Ct CW		_
	Mailing Address 499 South Capitol St SW Ste 422		
Ī	City State	Zip Code	
	Washington	DC 20003	
	Outstanding Balance Beginning This Period		Transaction ID: D534939
	656.00		
	Amount Incomed This Paried	Dayman This David	Outstanding Delayers at Olega of This Devised
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	0.00	0.00	656.00
-	D. E. II. Nove (Least First Middle 1979) of Database	0.040	Not as all Districts
	B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of Debt (Purpose):
f	Mailing Address		
	City State	Zip Code	
ŀ			
	Outstanding Balance Beginning This Period		
	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
- 1		Favilletii Itiis Fellou	
	Attiount industrial trial toriog	rayment mis renou	Culturaling Balance at close of This Felica
	Allocate interior Tillo I Silota	rayment this reliou	Cutataning Balance at Glose of This Foriog
-	, ,	7 7 7 7 7	
	C. Full Name (Last, First, Middle Initial) of Debtor	7 7 7 7 7	1
	, ,	7 7 7 7 7	
	, ,	7 7 7 7 7	
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address	or Creditor	
	C. Full Name (Last, First, Middle Initial) of Debtor	7 7 7 7 7	
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City	or Creditor	
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address	or Creditor	
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City	or Creditor	
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City	or Creditor	
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period	or Creditor State Zip Code	Nature of Debt (Purpose):
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period	or Creditor State Zip Code	Nature of Debt (Purpose):
	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period	or Creditor State Zip Code	Nature of Debt (Purpose): Outstanding Balance at Close of This Period
-	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period	or Creditor State Zip Code Payment This Period	Nature of Debt (Purpose):
1)	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional)	or Creditor State Zip Code Payment This Period	Outstanding Balance at Close of This Period 656.00
1)	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period	or Creditor State Zip Code Payment This Period	Nature of Debt (Purpose): Outstanding Balance at Close of This Period
1)	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line number of	or Creditor State Zip Code Payment This Period only)	Outstanding Balance at Close of This Period 656.00
1)	C. Full Name (Last, First, Middle Initial) of Debtor Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period SUBTOTALS This Period This Page (optional)	or Creditor State Zip Code Payment This Period only)	Outstanding Balance at Close of This Period 656.00 656.00